

# PCT

## CHAPTER II

### FEE CALCULATION SHEET

#### Annex to the Demand

International application No. <b>PCT/JP03/07992</b>	For International Preliminary Examining Authority use only
Applicant's or agent's file reference <b>R03089 PCT</b>	Date stamp of the IPEA
Applicant	
<b>CALCULATION OF PRESCRIBED FEES</b>	
1. Preliminary examination fee .....	28,000 <span style="border: 1px solid black; padding: 0 5px;">P</span>
2. Handling fee ( <i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i> ) .....	19,200 <span style="border: 1px solid black; padding: 0 5px;">H</span>
3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box .....	47,200
<b>TOTAL</b>	
<b>MODE OF PAYMENT</b>	
<input type="checkbox"/> authorization to charge deposit account with the IPEA (see below)	<input type="checkbox"/> cash
<input type="checkbox"/> cheque	<input checked="" type="checkbox"/> revenue stamps
<input type="checkbox"/> postal money order	<input type="checkbox"/> coupons
<input checked="" type="checkbox"/> bank draft	<input type="checkbox"/> other (specify):
<b>AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT</b>	
(This mode of payment may not be available at all IPEAs)	
<input type="checkbox"/> Authorization to charge the total fees indicated above.	IPEA/ _____
<input type="checkbox"/> (This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit) Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.	Deposit Account No.: _____
	Date: _____
	Name: _____
	Signature: _____